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NEW MEXICO
ENVIRONMENT DEPARTMENT
Drinking Water Bureau

PO Box 5469

Santa Fe, NM 87502

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www.env.nm.gov/drinking_water/

Notification Sent via Email



JAMES C. KENNEY
Cabinet Secretary

JENNIFER J. PRUETT
Deputy Secretary

May 1, 2020

Gabriel Maestas
Springer Correctional Facility, NM3500104
P.O. Box 10
Springer, NM 87747

RE: Notice of Violation - Stage 2 Disinfection Byproducts Rule
Total Trihalomethanes (TTHM) Maximum Contaminant Level

Dear Gabriel Maestas:

This letter serves as Notice of Violation that the Springer Correctional Facility water system exceeded the Locational Running Annual Average (LRAA) maximum contaminant level (MCL) for Total Trihalomethanes (TTHM) at the TTHM-1 and HAA5-1 sampling locations during the 1st quarter of 2020. The LRAA for the Springer Correctional Facility water system at the TTHM-1, Programs BLDG and HAA5-1, Laundry are shown in the table below:

Sample Location	Sample Date	Quarter & Year	TTHM LRAA (mg/L)
TTHM-1, Programs BLDG	2/24/2020	1Q2020	0.117
HAA5-1, Laundry	2/24/2020	1Q2020	0.119

The MCL for Total Trihalomethanes is 0.080 milligrams per liter (mg/L) at each individual sampling location. The MCL for Total Trihalomethanes are defined in the New Mexico Drinking Water Regulations, 20.7.10.100 NMAC [incorporating 40 CFR Section 141.64(b)(2)(i)]. The MCL for Total Trihalomethanes are determined by calculating the locational running annual average (LRAA) pursuant to 20.7.10.100 NMAC, [incorporating 40 CFR 141.620(d)].

Based on the exceedance of the MCL for Total Trihalomethanes, the New Mexico Environment Department Drinking Water Bureau (DWB) requires the Springer Correctional Facility water system to notify customers of these MCL exceedances as required in 20.7.10.100 NMAC [incorporating 40 CFR Section 141.203(b)(1) and 141.203(b)(2)]. The notice must be provided to all customers and others who drink the water within thirty (30) days from the date on this letter and must be issued every three (3) months as long as the exceedances persist. Public notice must be provided by hand delivery, mail delivery or by posting in conspicuous locations and any other method reasonably calculated to reach others. This notice must remain posted as long as the violation persists.

EXHIBIT

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Please fill out and return the enclosed Public Notice Certification Form to:

Oneva Peña
Drinking Water Bureau
P.O. Box 5469
Santa Fe, NM 87502-5469

Or by email to nmenv.dbp@state.nm.us

Failure to comply with the public notice requirements will result in an additional violation(s) (failure to notify the public and the state) being issued without notice to the Springer Correctional Facility. Continued failure to comply with Public Notification Requirements, as defined in 20.7.10.100 NMAC [incorporating 40 CFR Sections 141.203 and 141.31(d)] will result in escalated enforcement actions including issuance of Administrative Orders with possible penalties assessed against the Springer Correctional Facility.

NMED-DWB reserves the right to take additional enforcement action regarding the violations identified in this NOV, to include the issuance of an Administrative Compliance Order compelling compliance and issuing civil penalties.

If you have any questions or need assistance, please contact me by phone at 505-476-8648 or e-mail nmenv.dbp@state.nm.us.

Respectfully,



Oneva Peña, DBP2 Rule Administrator
Drinking Water Bureau
Water Protection Division

Enclosures: Public Notice Template
 Public Notice Certification Form

cc: Wayne Jeffs, Northern Area Compliance Supervisor (electronic)
 Electronic Central File

Template on Following Page

If your system's locational running annual average for Total Trihalomethanes (TTHM) exceeds the MCL of 0.080 mg/L at one or more sampling locations, you must provide public notice to persons served as soon as practical but within 30 days after you learn of the violation 20.7.10.100 NMAC [incorporating 40 CFR 141.203(b)]. You must issue a repeat notice every three months for as long as the violation persists.

Community systems must use one of the following methods 20.7.10.100 NMAC [incorporating 40 CFR 141.203(c)]:

- Hand or direct delivery
- Mail, as a separate notice or included with the bill

Noncommunity systems must use one of the following methods 20.7.10.100 NMAC [incorporating 40 CFR 141.203(c)]:

- Posting in conspicuous locations
- Hand delivery
- Mail

In addition, both community and noncommunity systems must use *another* method reasonably calculated to reach others if they would not be reached by the first method 20.7.10.100 NMAC [incorporating 40 CFR 141.203(c)]. Such methods could include newspapers, e-mail, or delivery to community organizations. If you mail, post, or hand deliver, print your notice on your system's letterhead, if available.

The notice on the reverse is appropriate for mailing, posting, or hand delivery. If you modify this notice, you must still include all required PN elements from 40 CFR 141.205(a) and leave the mandatory language unchanged (see below).

Mandatory Language

Mandatory language on health effects (from Appendix B to Subpart Q) must be included as written (with blanks filled in) and is presented in this notice in italics and with an asterisk on either end.

You must also include standard language to encourage the distribution of the public notice to all persons served, where applicable 20.7.10.100 NMAC [incorporating 40 CFR 141.205(d)]. This language is also presented in this notice in italics and with an asterisk on either end.

Corrective Action

In your notice, describe corrective actions you are taking. Listed below is one step commonly taken by water systems with TTHM MCL violations. You can include the following statement, if appropriate, or develop your own text:

- We are working to minimize the formation of [TTHM] while ensuring we maintain an adequate level of disinfectant. We have taken additional steps to change disinfectant type/levels, remove natural organic matter, and increased flushing of water lines to determine if our efforts have been effective.

Repeat Notices

For repeat notices, you should state how long the violation has been ongoing and remind consumers of when you sent out any previous notices. If you are making progress, describe it. Alternatively, if funding or other issues are delaying progress, let consumers know.

After Issuing the Notice

Make sure to send The New Mexico Environment Department's Drinking Water Bureau a copy of each type of notice and a certification that you have met the public notice requirements within ten days after you issued the notice 20.7.10.100 NMAC [incorporating 40 CFR 141.31(d)].

****PUBLIC WATER SYSTEM MUST APPROPRIATELY MODIFY THIS PUBLIC NOTICE TO INCLUDE UP-TO-DATE INFORMATION REGARDING THE VIOLATION AS WELL AS INFORMATION ABOUT THE CURRENT STATUS OF THE VIOLATION'S AFFECT ON THE WATER SYSTEM. PUBLIC WATER SYSTEM OFFICIAL MUST DELETE THIS PARAGRAPH ONCE PUBLIC NOTICE HAS BEEN APPROPRIATELY UPDATED, PRIOR TO SENDING OUT TO THE PUBLIC****

IMPORTANT INFORMATION ABOUT YOUR DRINKING WATER

Total Trihalomethanes (TTHM) MCL Violation at Springer Correctional Facility

Este informe contiene información importante acerca de su agua potable. Haga que alguien lo traduzca para usted, o hable con alguien que lo entienda

Our water system recently violated a drinking water standard. Although this is not an emergency, as our customers, you have a right to know what happened, what you should do, and what we are doing to correct this situation.

We routinely monitor for the presence of drinking water contaminants. Testing results show that our system exceeds the standard or maximum contaminant level (MCL) for Total Trihalomethanes. The standard for Total Trihalomethanes is 0.080 mg/L. The average level of Total Trihalomethanes over the last quarter is shown in the table below:

Sample Location	Sample Date	Quarter & Year	TTHM LRAA (mg/L)
TTHM-1, Programs BLDG	2/24/2020	1Q2020	0.117
HAA5-1, Laundry	2/24/2020	1Q2020	0.119

What should I do?

- There is nothing you need to do. You do not need to boil your water or take corrective actions. If a situation arises where the water is no longer safe to drink, you will be notified within 24 hours.
- If you have a severely compromised immune system, have an infant, are pregnant, or are elderly, you may be at increased risk and should seek advice from your health care providers about drinking this water.

What does this mean?

This is not an emergency. If it had been an emergency, you would have been notified within 24 hours. TTHM are four volatile organic chemicals which form when disinfectants react with natural organic matter in the water.

People who drink water containing trihalomethanes in excess of the MCL over many years may experience problems with their liver, kidneys, or central nervous systems, and may have an increased risk of getting cancer

What is being done?

[Describe corrective action.] We anticipate resolving the problem within **[estimated time frame].**

For more information, please contact:

Gabriel Maestas at 575-483-3100
Springer Correctional Facility, NM3500104
P.O. Box 10
Springer, NM 87747

**Please share this information with all the other people who drink this water, especially those who may not have received this notice directly (for example, people in apartments, nursing homes, schools, and businesses). You can do this by posting this notice in a public place or distributing copies by hand or mail. **



New Mexico Environment Department - Drinking Water Bureau

Public Notification Certification Form – All Tiers

Requirements Pursuant to 40 CFR 141 (Subpart Q)

****This form and a copy of your Notice to the Public must be submitted to the State within 10 days of notifying your customers.****

PWSID#: NM3500104 **Water System Name:** Springer Correctional Facility

Violation or Situation Date: 1Q2020

Individual Contaminant or Contaminant Group: 02-TTHM MCL

Violation or Situation Type: Maximum Contaminant Level Exceedance at Distribution

Violation or Situation Public Notification Tier: Tier 2

Distributed the notice by the following method(s), and on the following date(s) in accordance with 40 CFR 141.201:

- | | |
|---|-------------|
| <input type="checkbox"/> Continuously Post | Date: _____ |
| <input type="checkbox"/> Separate Mailing to Customers | Date: _____ |
| <input type="checkbox"/> Hand Deliver Notice to Customers | Date: _____ |
| <input type="checkbox"/> Publish Notice in Newspaper | Date: _____ |
| <input type="checkbox"/> Release Notice to and Announced by Broadcast Media | Date: _____ |
| <input type="checkbox"/> Post Notice on System Website | Date: _____ |
| <input type="checkbox"/> Billing | Date: _____ |
| <input type="checkbox"/> Annual Report (Consumer Confidence Report) | Date: _____ |
| <input type="checkbox"/> Other: _____ | Date: _____ |

Attach a copy of the posted Public Notice(s) to this certification form.

The public water system named above hereby certifies that public notification has been provided to its consumers in accordance with all delivery, content, and format requirements specified in 40 CFR Part 141:

Water System Representative: _____
(Signature) (Print Name) (Phone Number)

Date of Certification: _____



New Mexico Environment Department - Drinking Water Bureau Violation Inventory Action Form

General Information		<input checked="" type="checkbox"/> 2950 - TOTAL TTHM	
System Name: Springer Correctional Facility		Staff: Oneva Pena Manager: Tanya Trujillo	
WSS# NM3500104		Data Steward: Daniel Ramirez Date: 5/1/2020	
Violation Type: 02		Enforcement Type SIA SIE Determination Date: 5/1/2020	
Water System Facility #: 000		Violation Period(s): 1Q2020	

Comments:	Please migrate the attached 02 TTHM LRAA MCL violation. Springer Correctional Facility exceeded the LRAA MCL for TTHMs during the 1 st quarter of 2020 monitoring period(s).
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Violation Action	<input checked="" type="checkbox"/> Validate <input type="checkbox"/> Reject (Needs Area Supervisor Approval Below) <input type="checkbox"/> Delete (Needs Area Supervisor and PWSS Manager Approval Below)
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Approval Required for Deleted or Rejected Violations	
AREA SUPERVISOR	
<input type="checkbox"/> Approved	<input type="checkbox"/> Denied
Area Supervisor Comments:	
Area Supervisor Name: _____ Date: _____ Area Supervisor Signature: _____	
PWSS GROUP MANAGER	
<input type="checkbox"/> Approved	<input type="checkbox"/> Denied
PWSS Group Manager Comments:	
PWSS Group Manager Name: _____ Date: _____ PWSS Group Manager Signature: _____	